



Guinea: Report on Female Genital Mutilation (FGM) or Female Genital Cutting (FGC)

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Practice:

A variety of forms of female genital mutilation (FGM) or female genital cutting (FGC) are widely practiced in Guinea, including Type I (commonly referred to as clitoridectomy), Type II (commonly referred to as excision) and Type III (commonly referred to as infibulation). Some families are starting to opt for a slight symbolic incision on the genitals (Type IV).

These procedures are practiced without distinction as to ethnicity (Peul, Malinke, Soussou, Guerze, Toma, Nalou), religion (Islam, Christianity, Animism) or region of the country (Upper Guinea, Middle Guinea, Lower Guinea, Forest region). The only variation among the regions is the age at which a young girl undergoes the procedure.

Incidence:

According to a 1999 Demographic and Health Survey of 6,753 women nationally, 98.6 percent of the women of Guinea have undergone one of these procedures. In Lower and Upper Guinea, girls are usually ten to twelve years of age when they undergo the procedure. In Middle Guinea girls are four to eight years of age.

A growing number of women and men oppose the practice. Some urban educated families are beginning to opt for a slight symbolic incision on the genitals rather than the complete procedure.

Attitudes and Beliefs:

These practices are firmly rooted in tradition. Girls generally live with their families until they marry. If a girl resists having the procedure, she would likely be mocked by others in her village and would have difficulty in finding a husband.

Type I:

Type I is the excision (removal) of the clitoral hood with or without removal of all or part of the clitoris.

Type II:

Type II is the excision (removal) of the clitoris together with part or all of the labia minora (the inner vaginal lips).

Type III:

Type III is the excision (removal) of part or all of the external genitalia (clitoris, labia minora and labia majora) and stitching or narrowing of the vaginal opening, leaving a very small opening, about the size of a matchstick, to allow for the flow of urine and menstrual blood. The girl or woman's legs are generally bound together from the hip to the ankle so she remains immobile for approximately 40 days to allow for the formation of scar tissue.

Type IV:

Type IV covers a number of methods including piercing the clitoris and/or labia. In Guinea, a slight symbolic incision on the genitals, rather than the whole procedure, is starting to be used by some families.

These procedures are generally performed without the use of anesthesia.

Outreach Activities:

In Guinea, the organization that deals with traditional practices affecting the health of women and children is CPTAFE or Coordinating Body on Traditional Practices Affecting the Health of Women and Children (Cellule de Coordination sur les Pratiques Traditionnelles Affectant la Sante des Femmes et des Enfants). It is a well-established non-governmental organization (NGO) that came into existence in 1988. It is recognized by the government of Guinea. This organization collaborates with the government through the Department of Health and Social Affairs and Women's Affairs.

CPTAFE is a strong advocate. It has long worked to eradicate this practice in Guinea and to aid potential victims of it. Through its efforts, an article has been included in the Guinean Constitution that upholds the right to physical integrity of the person and

condemns all forms of inhumane treatment.

The organization has produced four films on this practice, brochures and leaflets, radio and television programs, seminars, information and training for journalists, religious leaders, opinion leaders, former excisors, educators, entrepreneurs, cultural workers (such as Griots or traditional folklorists) and health professionals.

In 1997, CPTAFE collected and analyzed data for this practice carried out in Haute-Guinee and Moyenne-Guinee. A theater play about the harmful effects, "Tradition, Tradition" was performed before members of the government and diplomatic corps, journalists, students and women's associations by a well known theatrical company of Guinea. After several performances, the play went on a national tour.

Regional committees of CPTAFE held cultural and sports events. A soccer tournament was held in the Labe region. The winning team received a cup engraved with the name of a prominent activist in the campaign against FGM/FGC, El Hadj Abdourhamane Diallo, who is the Imam of Labe. A conference was also held on this subject for the English Speaking Women's Association at the American Cultural Center in the capital, Conakry.

On March 17, 1997, the government initiated a 20 year (1996-2015) strategy to eradicate FGM/FGC in collaboration with the World Health Organization's (WHO) Africa regional efforts. The purpose is to reinforce and institutionalize efforts to date through better coordination and planning with NGOs using various communication and education mediums to inform the public about this practice.

The Head of State, the First Lady and other high-level government officials have spoken out in the public against this practice.

Legal Status:

This practice is illegal in Guinea under Article 265 of the Penal Code. The punishment is hard labor for life and if death results within 40 days after the crime, the perpetrator will be sentenced to death. No cases regarding this practice under the law have ever been brought to trial.

Article 6 of the Guinean Constitution, which outlaws cruel and inhumane treatment, could be interpreted to include this practice, should a case be brought to the Supreme Court. A member of the Guinean Supreme Court is working with the local CPTAFE on inserting a clause into the Guinean Constitution specifically prohibiting this practice.

Protection:

In May 1996, CPTAFE was contacted by an NGO in France regarding the case of a Guinean woman who did not want to be repatriated to Guinea because she feared her two daughters would be excised. CPTAFE responded to the French NGO that the woman's fears were well founded as this procedure is often inflicted upon girls visiting relatives in Guinea.

In another incident, a girl was sent by her parents in France to Guinea to be excised. CPTAFE met the mother and daughter upon their arrival at the airport and held an informational counseling session at their home in Conakry. The girl was not excised.

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